

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective October 1, 2003

Application or Docket Number

*TS-5018 (05)*

**CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

|                                  |               |                          |
|----------------------------------|---------------|--------------------------|
| TOTAL CLAIMS                     | 13            |                          |
| FOR                              | NUMBER FILED  | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | 13 minus 20=* | 8-                       |
| INDEPENDENT CLAIMS               | 2 minus 3 =*  | 0                        |
| MULTIPLE DEPENDENT CLAIM PRESENT |               | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    | CLAIMS REMAINING AFTER AMENDMENT |                          | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|----------------------------------|--------------------------|------------------------------------|---------------|
|  | Total                            | *                        | Minus                              | ** =          |
| Independent                                    | *                                | Minus                    | ***                                | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  | <input type="checkbox"/> |                                    |               |

SMALL ENTITY  
TYPE

|           |        |
|-----------|--------|
| RATE      | FEES   |
| BASIC FEE | 385.00 |
| XS 9=     |        |
| X43=      |        |
| +145=     |        |
| TOTAL     |        |

OTHER THAN  
OR SMALL ENTITY

|           |        |
|-----------|--------|
| RATE      | FEES   |
| BASIC FEE | 770.00 |
| XS18=     |        |
| X86=      |        |
| +290=     |        |
| TOTAL     |        |

SMALL ENTITY

OR

|                  |                |
|------------------|----------------|
| RATE             | ADDITIONAL FEE |
| X\$ 9=           |                |
| X43=             |                |
| +145=            |                |
| TOTAL ADDIT. FEE |                |

OTHER THAN  
SMALL ENTITY

|                  |                |
|------------------|----------------|
| RATE             | ADDITIONAL FEE |
| X\$18=           |                |
| X86=             |                |
| +290=            |                |
| TOTAL ADDIT. FEE |                |

| AMENDMENT B                                    | CLAIMS REMAINING AFTER AMENDMENT |                          | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|----------------------------------|--------------------------|------------------------------------|---------------|
|  | Total                            | *                        | Minus                              | ** =          |
| Independent                                    | *                                | Minus                    | ***                                | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  | <input type="checkbox"/> |                                    |               |

RATE  
ADDITIONAL FEE

|                  |  |
|------------------|--|
| X\$ 9=           |  |
| X43=             |  |
| +145=            |  |
| TOTAL ADDIT. FEE |  |

RATE  
ADDITIONAL FEE

|                  |  |
|------------------|--|
| X\$18=           |  |
| X86=             |  |
| +290=            |  |
| TOTAL ADDIT. FEE |  |

| AMENDMENT C                                    | CLAIMS REMAINING AFTER AMENDMENT |                          | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|----------------------------------|--------------------------|------------------------------------|---------------|
|  | Total                            | *                        | Minus                              | ** =          |
| Independent                                    | *                                | Minus                    | ***                                | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  | <input type="checkbox"/> |                                    |               |

RATE  
ADDITIONAL FEE

|                  |  |
|------------------|--|
| X\$ 9=           |  |
| X43=             |  |
| +145=            |  |
| TOTAL ADDIT. FEE |  |

RATE  
ADDITIONAL FEE

|                  |  |
|------------------|--|
| X\$18=           |  |
| X86=             |  |
| +290=            |  |
| TOTAL ADDIT. FEE |  |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.